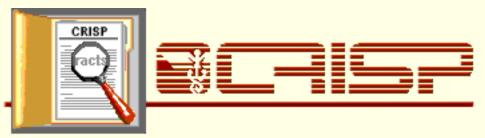crispprd 1.0

Abstract

Grant Number: 5R01NR004691-03

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PI Title: ASSOCIATE PROFESSOR

Project Title: SHAPING COGNITIVE REPRESENTATIONS FOR HYPERTENSIVE WOMEN

Abstract: This prospective study, Shaping Cognitive Representations for Hypertensive Women, evaluates a treatment protocol for enhancing compliance with BP medication and lower blood pressure (BP). Currently, compliance with daily anti-hypertensive medication regimes is recommended for treating essential hypertension (HTN). For some people, compliance is extremely difficult due to knowledge deficits, denial of need for treatment, inadequate access to health care and problems with interacting with health care providers. The high incidence of uncontrolled BP in middle-aged African American women (AAW) who are being treated suggests chronic non-compliance with medical regimens. Studies have shown that cognitive representations (CRs) are enduring memories of beliefs, attitudes and intentions for behavior that organizes knowledge for decisions to guide behavior. CRs involve integration of perceptual stimuli for the purpose of appraising, coping, adapting, and learning. Research has not thoroughly examined whether CRs of medication behavior (CRMB) may be linked to non-compliance with HTN treatment. Preliminary data demonstrated that AAW manifested higher BP and more maladaptive CRMB than White American women (WAW), and a theoretically-derived cognitive-behavioral intervention (CBI) may be effective in decreasing non-compliance and uncontrolled BP. The purpose of this proposed research is to test the effectiveness of a CBI in the management of HTN to improve nursing responsiveness among diverse populations. This four-year, longitudinal study addresses the following specific aims with measures for outcomes at one, three and six months post intervention: 1) to evaluate the impact of a CBI on (a) compliance, (b) 24-hour ambulatory BP monitoring (ABPM), (C) knowledge of HTN, and (d) general sense of well-being; 2) to evaluate the impact of a CBI on CRMB; 3)

to assess the immediate effects of reading a goal and tailored message on self-measured MP, and subjects' perceived usefulness of a messages; and 4) to test whether the CBI has a greater impact on HTN treatment in AAW than WAW. Women (N=160), ages 34-65, with Stages I and II HTN recruited from ambulatory clinics will be randomly assigned to a CBI or standard medical therapy group, stratified by racial identity and complexity of treatment regimen. The CBI will require participants to perform a self-monitored learning program for 20 minutes per day over 30 days. Data will be analyzed using repeated measures ANOVA. Descriptive, parametric and non- parametric statistical procedures will be used to analyze the results and research hypothesis.

Thesaurus Terms:
cognitive behavior therapy, essential hypertension, female, human therapy evaluation, therapy compliance
African American, blood pressure, caucasian American, cognition, health behavior, longitudinal human study, racial /ethnic difference, self care
clinical research, human subject, patient monitoring device, questionnaire

Institution:	UNIVERSITY OF MICHIGAN AT ANN ARBOR
	ANN ARBOR, MI 48109
Fiscal Year:	2001
Department:	NONE
Project Start:	01-JAN-1999
Project End:	30-SEP-2002
ICD:	NATIONAL INSTITUTE OF NURSING RESEARCH
IRG:	NURS